Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 1 of 67

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF MINNESOTA		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's	Anna First name	-	First name
	license or passport).	H Middle name	_	Middle name
	Bring your picture identification to your meeting with the trustee.	Babington-Johnson Last name and Suffix (Sr., Jr., II, III)	_	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	FKA Anna B Hyde		
	Include your married or maiden names.	FKA Anna Hyde Babington-Johnson		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7398		

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 2 of 67

Debtor 1 Anna H Babington-Johnson

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	☐ I have not used any business name or EINs. ASF Diversity Connection, LLC FDBA Diversity Connection Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	8001 Wesley Dr	If Debtor 2 lives at a different address:
		Golden Valley, MN 55427 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Hennepin County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main

Page 3 of 67 Document Debtor 1 Anna H Babington-Johnson Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When District Case number When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When District Case number, if known Debtor Relationship to you When Case number, if known District

11. Do you rent your residence?

■ No.

Go to line 12.

☐ Yes.

Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

☐ No. Go to line 12.

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main

Deb	tor 1 Anna H Babingtor	-Johnso	n	Case number (if known)
Par	Report About Any Bu	sinesses	You Owr	n as a Sole Proprietor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	o Part 4.
		☐ Yes.	Name	e and location of business
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	ber, Street, City, State & ZIP Code
	it to this petition.		Chec	ck the appropriate box to describe your business:
				Health Care Business (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as defined in 11 U.S.C. § 101(53A))
				Commodity Broker (as defined in 11 U.S.C. § 101(6))
				None of the above
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?		deadlines	s. If you ir is, cash-f	nder Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate ndicate that you are a small business debtor, you must attach your most recent balance sheet, statement of flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure i(1)(B).
	For a definition of small	■ No.	I am ı	not filing under Chapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code	filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy e.
		☐ Yes.	I am f	filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	Hazardo	ous Property or Any Property That Needs Immediate Attention
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat	☐ Yes.		
	of imminent and	— 100.	What is	the hazard?
	identifiable hazard to public health or safety?			
	Or do you own any		If immo	diate attention is
	property that needs immediate attention?			, why is it needed?
	For example, do you own perishable goods, or			
	livestock that must be fed, or a building that needs		Where is	is the property?

Number, Street, City, State & Zip Code

urgent repairs?

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 5 of 67

Debtor 1 Anna H Babington-Johnson

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 6 of 67

Deb	tor 1 Anna H Babingtor	า-Johnsor	1		Case number (if kr	nown)
Par	6: Answer These Quest	ions for Re	porting Purposes			
16.	What kind of debts do you have?			consumer debts? Consumer rsonal, family, or household pu		n 11 U.S.C. § 101(8) as "incurred by an
			Yes. Go to line 17.			
		16b.		ousiness debts? Business de	obte are debte that y	you incurred to obtain
			money for a business or inv	restment or through the operat		
			□ No. Go to line 16c.			
			Yes. Go to line 17.	that are not accommon de		
		16c. -	State the type of debts you	owe that are not consumer de	edts of business der	ots
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and			Do you estimate that after any vailable to distribute to unsect		s excluded and administrative expenses
	administrative expenses		■ No			
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes			
18.	How many Creditors do	1 -49		□ 1,000-5,000		□ 25,001-50,000
	you estimate that you owe?	☐ 50-99		5001-10,000		□ 50,001-100,000
	owe:	□ 100-19	9	1 0,001-25,000		☐ More than100,000
		200-99	9			
19.	How much do you	□ \$0 - \$5	0,000	□ \$1,000,001 - \$10 r	million	□ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		1 - \$100,000	1 \$10,000,001 - \$50		□ \$1,000,000,001 - \$10 billion
			01 - \$500,000	□ \$50,000,001 - \$10 □ \$100,000,001 - \$5		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		□ \$500,0	01 - \$1 million	山 \$100,000,001 - \$5	OU MIIIION	inote than \$50 billion
20.	How much do you	□ \$0 - \$5		□ \$1,000,001 - \$10 r		□ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50		\$1,000,000,001 - \$10 billion
			01 - \$500,000	□ \$50,000,001 - \$10 □ \$100,000,001 - \$5		□ \$10,000,000,001 - \$50 billion □ More than \$50 billion
		\$500,0	01 - \$1 million	<u> </u>	OO MIIIION	More than \$50 billion
Par	37: Sign Below					
For	you	I have exa	mined this petition, and I de	eclare under penalty of perjury	that the information	n provided is true and correct.
				7, I am aware that I may proce relief available under each characteristics.		er Chapter 7, 11,12, or 13 of title 11, to proceed under Chapter 7.
				not pay or agree to pay some he notice required by 11 U.S.C		attorney to help me fill out this
		I request r	elief in accordance with the	chapter of title 11, United Stat	tes Code, specified	in this petition.
		bankrupto and 3571.	y case can result in fines up	to \$250,000, or imprisonment		perty by fraud in connection with a or both. 18 U.S.C. §§ 152, 1341, 1519,
			H Babington-Johnson Babington-Johnson		ature of Debtor 2	
			of Debtor 1	Jigite	ataro or Doblor Z	
		Executed	, -,	Exec	cuted on	
			MM / DD / YYYY		MM / DD	

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 7 of 67

Debtor 1 Anna H Babington-Johnson Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Matthew M. Tande	Date	May 3, 2017
Signature of Attorney for Debtor	_	MM / DD / YYYY
Matthew M. Tanda		
Matthew M. Tande		
Printed name		
Prescott Pearson & Tande, PA		
Firm name		
Po Box 120088		
New Brighton, MN 55112-0088		
Number, Street, City, State & ZIP Code		
Contact phone (651) 633-2757	Email address	
388339		
Bar number & State		

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Mail Document Page 8 of 67

			int ingo on the	
Fill in this infor	mation to identify your	case:		
Debtor 1	Anna H Babingto	n-Johnson		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF MINNES	ОТА	
Case number				
(if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

2/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	286,137.54
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	9,589.44
	1c. Copy line 63, Total of all property on Schedule A/B	\$	295,726.98
Pa	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	366,054.16
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	350,619.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	152,905.00
	Your total liabilities	\$	869,578.16
Pa≀	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,984.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	7,817.00
Pa:	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 9 of 67

Debtor 1 Anna H Babington-Johnson

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

7,916.66

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	350,619.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	350,619.00

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main

				Doc	ument	Page 10 of 67			
Fill ir	this informat	ion to identify	your case and th	nis filin	g:				
Debto	or 1	Anna H Bab	ington-Johnsoi	า					
	=	First Name	Middle	Name		Last Name			
Debto (Spous	_	First Name	Middle	Name		Last Name			
		untov Court for	the: DISTRICT	OE MIN	INESOTA				
Unite	d States Bankri	upicy Court for	the. DISTRICT	OF WIII	NINESOTA				
Case	number								☐ Check if this is an
									amended filing
Offi	cial Form	<u>า 106A/E</u>	<u> </u>						
Sc	hedule	A/B: Pi	roperty						12/15
nform	ation. If more sp r every question	pace is needed, and	attach a separate sl	heet to t	his form. On	ple are filing together, both are the top of any additional page Own or Have an Interest In			
	No. Go to Part 2. Yes. Where is the	e property?							
1.1				Wha	t is the prope	rty? Check all that apply			
_	8001 Wesley		ania tia a		Single-famil	y home			ms or exemptions. Put
	Street address, if av	allable, of other des	cription		! ·	nulti-unit building			claims on Schedule D: s Secured by Property.
					Condominiu	ım or cooperative			
					Manufacture	ed or mobile home	Current va	luo of the	Current value of the
	Golden Valle	y MN	55427-0000		Land		entire prop		portion you own?
	City	State	ZIP Code			property	\$28	6,137.54	\$286,137.54
									our ownership interest
						est in the property? Check one		e simple, tena e), if known.	ncy by the entireties, or
					Debtor 1 on		Homeste	ead	
	Hennepin				Debtor 2 on	ly			
	County					d Debtor 2 only	☐ Check	if this is com	nunity property
					711 10001 0110	of the debtors and another	(see ins	tructions)	
						you wish to add about this ite	m, such as lo	cal	
				Leg	ally descri	ibed as: Lot 1, Block 2, (unty, Minnesota.	Golden Oal	ks Second /	Addition,
					edemption 6,137.54.	period. Tax value is \$2	32,000.00.	Sheriff's sa	ale bid was
						s from Part 1, including an		=>	\$286,137.54

Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Schedule A/B: Property

Official Form 106A/B

page 1

Page 11 of 67 Document Case number (if known) Debtor 1 Anna H Babington-Johnson 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Nissan Do not deduct secured claims or exemptions. Put Who has an interest in the property? Check one Make: the amount of any secured claims on Schedule D: **Altima** Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only 2009 Year: Debtor 2 only Current value of the Current value of the 203,000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: lacksquare At least one of the debtors and another \$3,632.00 \$3,632.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put **Land Rover** Who has an interest in the property? Check one 3.2 Make: the amount of any secured claims on Schedule D: Range Rover Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only 2002 Debtor 2 only Current value of the Current value of the Approximate mileage: 200.000 Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another Has \$7,000 in work needed to \$500.00 \$500.00 get it in running condition. ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$4,132.00 pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Π Nο Yes. Describe..... Household goods and furnishings, including all furniture, appliances, dishes, silverware, wall coverings, art work of nominal value and other items in the household used for personal use \$3,300.00 valued at less than \$600 per item. 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... Household electronics of nominal value and other related items in the household held for personal use including 2 televisions \$150 \$900.00 each; 2 ipads \$200 each; 1 cell phone \$200;

Official Form 106A/B Schedule A/B: Property page 2

Case 17-41328

Doc 1

Filed 05/03/17

Entered 05/03/17 09:17:17

Desc Main

Filed 05/03/17 Entered 05/03/17 09:17:17 Document Page 12 of 67 Debtor 1 Case number (if known) Anna H Babington-Johnson 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$1,000.00 Wearing Apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... Costume jewelry \$200.00 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$5,400.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ No

Official Form 106A/B Schedule A/B: Property page 3

■ Yes.....

Case 17-41328

Doc 1

Desc Main

	Case 17-4	1328 Doc 1	Filed 05/03/17		/03/17 09:17:17	Desc Main
Debtor 1	Anna H Babin	igton-Johnson	Document	Page 13 of 6	Case number (if known)	
					Cash on hand	
					It is the	
					debtor's	
					intent to exempt the	
					full fair	
					market value	
					of all assets	
					listed in the schedules,	
					but only to	
					the extent	
					allowed under	
					and limited in	
					value by the claimed	
					exemption. All	
					assets have	
					been valued	
					in good faith at a full fair	
					market value	
					by the debtor.	\$41.00
□ No ■ Yes			Institution i	name:		
		Ol I-!	i Walla Ea	rae Benk Cheekin	a ¢16 11 Covingo	
		Checking a	and Wells Far Negative		ng \$16.44 Savings	\$16.44
Examp	, mutual funds, or oles: Bond funds, ir	17.1. Savings	Negative	Balance		\$16.44
Examp ■ No	, mutual funds, or oles: Bond funds, ir	17.1. Savings	Negative cks ith brokerage firms, more	Balance		\$16.44
■ No □ Yes 19. Non-pu joint v	oles: Bond funds, ir	r publicly traded stoc envestment accounts w	Negative ks ith brokerage firms, more ssuer name:	Balance ney market accounts		\$16.44
Examp ■ No □ Yes 19. Non-pu joint v □ No	oles: Bond funds, ir	r publicly traded stoc envestment accounts w	Negative cks ith brokerage firms, more ssuer name:	Balance ney market accounts		· · · · · · · · · · · · · · · · · · ·
Examp ■ No □ Yes 19. Non-pu joint v □ No	oles: Bond funds, ir	r publicly traded stoc nvestment accounts w Institution or is	Negative cks ith brokerage firms, more ssuer name:	Balance ney market accounts		· · · · · · · · · · · · · · · · · · ·
Examp ■ No □ Yes 19. Non-pu joint v □ No	oles: Bond funds, ir	r publicly traded stock investment accounts we show that institution or is took and interests in in the small matter about them	Negative cks ith brokerage firms, more ssuer name: corporated and unince ersity Connection, L ing and production 2017. Business loce e North, Suite 306.	ney market accounts orporated business LC, which is company. No sation is 2525	ses, including an interes	· · · · · · · · · · · · · · · · · · ·
Examp ■ No □ Yes 19. Non-pu joint v □ No	oles: Bond funds, ir	r publicly traded stochwestment accounts we Institution or is ck and interests in in Name of entity: She owns Dive an event plann income during Nevada Avenue office location. They have one June, and one After show exp	Negative cks ith brokerage firms, more ssuer name: acorporated and unince ersity Connection, L ing and production 2017. Business loce e North, Suite 306. show scheduled to in September. benses are paid, she renue to be able to o	Balance mey market accounts orporated business LC, which is company. No action is 2525 This is a rental happen in	ses, including an interes	· · · · · · · · · · · · · · · · · · ·
Examp ■ No □ Yes 19. Non-pu joint v □ No	oles: Bond funds, ir	r publicly traded stock and interests in in Mame of entity: She owns Dive an event plann income during Nevada Avenue office location. They have one June, and one After show expended in the man and one After show expended in the man and one and the man	Negative cks ith brokerage firms, more ssuer name: corporated and unince ersity Connection, L ing and production 2017. Business loce e North, Suite 306. show scheduled to in September. benses are paid, she renue to be able to conses and rent. nk Checking Account	Balance mey market accounts orporated business LC, which is company. No action is 2525 This is a rental happen in expects only catch up on	ses, including an interes	· · · · · · · · · · · · · · · · · · ·
Example No □ Yes 19. Non-pu joint v □ No	oles: Bond funds, ir	r publicly traded stochwestment accounts we Institution or is ck and interests in in mation about them Name of entity: She owns Dive an event plann income during Nevada Avenue office location. They have one June, and one After show expenough net revolusiness expended and the stock of the stock o	Negative cks ith brokerage firms, more ssuer name: corporated and unince ersity Connection, L ing and production 2017. Business loce e North, Suite 306. show scheduled to in September. benses are paid, she renue to be able to conses and rent. nk Checking Account	Balance ney market accounts orporated business LC, which is company. No action is 2525 This is a rental happen in expects only catch up on action in thas a	ses, including an interes	· · · · · · · · · · · · · · · · · · ·

Schedule A/B: Property Official Form 106A/B

page 4

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 14 of 67 Debtor 1 Case number (if known) **Anna H Babington-Johnson** 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. $\hfill \square$ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... None expected \$0.00

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

■ No

☐ Yes. Give specific information.....

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Page 15 of 67 Document Case number (if known) Debtor 1 Anna H Babington-Johnson 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$57.44 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information.......

Official Form 106A/B Schedule A/B: Property page 6

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Filed 05/03/17 Case 17-41328 Doc 1 Entered 05/03/17 09:17:17 Desc Main Document Page 16 of 67

Case number (if known) Debtor 1 **Anna H Babington-Johnson** Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$286,137.54 Part 2: Total vehicles, line 5 56. \$4,132.00 Part 3: Total personal and household items, line 15 57. \$5,400.00 58. Part 4: Total financial assets, line 36 \$57.44 Part 5: Total business-related property, line 45 59. \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 61. Total personal property. Add lines 56 through 61... \$9,589.44 Copy personal property total \$9,589.44 63. Total of all property on Schedule A/B. Add line 55 + line 62

Official Form 106A/B Schedule A/B: Property page 7

\$295,726.98

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Mail Document Page 17 of 67

Fill in this infor	mation to identify your	case:		
Debtor 1	Anna H Babingto	n-Johnson		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF MINNESOTA		
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106C

Part 1: Identify the Property You Claim as Exempt

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.							
☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)						
2.	2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	om Check only one box for each exemption.					
	8001 Wesley Dr Golden Valley, MN	\$286,137.54		\$0.00	11 U.S.C. § 522(d)(1)			
	55427 Hennepin County Legally described as: Lot 1, Block 2, Golden Oaks Second Addition, Hennepin County, Minnesota.			100% of fair market value, up to any applicable statutory limit				
	In redemption period. Tax value is \$232,000.00. Sheriff's sale bid was \$286,137.54. Line from Schedule A/B: 1.1							
	2009 Nissan Altima 203,000 miles Line from Schedule A/B: 3.1	\$3,632.00		\$3,632.00	11 U.S.C. § 522(d)(2)			
	Line from Scriedule AVB. 3.1			100% of fair market value, up to any applicable statutory limit				
	2002 Land Rover Range Rover 200.000 miles	\$500.00		\$0.00	11 U.S.C. § 522(d)(5)			
	Has \$7,000 in work needed to get it in running condition. Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit				

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 18 of 67

Anna H Babington-Johnson Case number (if known) Current value of the Amount of the exemption you claim Brief description of the property and line on Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Household goods and furnishings, 11 U.S.C. § 522(d)(3) \$3,300.00 \$3,300.00 including all furniture, appliances, dishes, silverware, wall coverings. 100% of fair market value, up to art work of nominal value and other any applicable statutory limit items in the household used for personal use valued at less than \$600 per item. Line from Schedule A/B: 6.1 Household electronics of nominal 11 U.S.C. § 522(d)(3) \$900.00 \$900.00 value and other related items in the household held for personal use 100% of fair market value, up to including 2 televisions \$150 each; 2 any applicable statutory limit ipads \$200 each; 1 cell phone \$200; Line from Schedule A/B: 7.1 Wearing Apparel 11 U.S.C. § 522(d)(3) \$1,000.00 \$1,000.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Costume jewelry 11 U.S.C. § 522(d)(4) \$200.00 \$200.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit Cash on hand 11 U.S.C. § 522(d)(5) \$41.00 \$41.00 It is the debtor's intent to exempt the full fair market value of all assets 100% of fair market value, up to listed in the schedules, but only to any applicable statutory limit the extent allowed under and limited in value by the claimed exemption. All assets have been valued in good faith at a full fair Line from Schedule A/B: 16.1 **Checking and Savings: Wells Fargo** 11 U.S.C. § 522(d)(5) \$16.44 \$16.44 Bank Checking \$16.44 Savings **Negative Balance** 100% of fair market value, up to Line from Schedule A/B: 17.1 any applicable statutory limit She owns Diversity Connection, LLC, 11 U.S.C. § 522(d)(5) \$0.00 \$0.00 which is an event planning and production company. No income 100% of fair market value, up to during 2017. Business location is any applicable statutory limit 2525 Nevada Avenue North, Suite 306. This is a rental office location. They have one show scheduled to happen in Ju Line from Schedule A/B: 19.1 None expected 11 U.S.C. § 522(d)(5) \$0.00 \$0.00 Line from Schedule A/B: 28.1 100% of fair market value, up to

any applicable statutory limit

Document Page 19 of 67

Debtor 1 Anna H Babington-Johnson Case number (if known)

3. Are you claiming a homestead exemption of more than \$160,375?
(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Filed 05/03/17

Doc 1

Case 17-41328

Yes

Entered 05/03/17 09:17:17

Desc Main

Official Form 106C

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main

	Document Pa	age 20	01 07		
Fill in this information to identify you	ur case:				
Debtor 1 Anna H Babing	ton- lohnson				
First Name		st Name		-	
Debtor 2					
(Spouse if, filing) First Name	Middle Name Las	st Name			
United States Dealermeter Court for the	. DISTRICT OF MININESOTA				
United States Bankruptcy Court for the	DISTRICT OF MINNESOTA				
Case number					
(if known)				☐ Check	if this is an
				amend	led filing
Official Form 106D					
Schedule D: Creditors	s Who Have Claims Se	cured	by Propert	V	12/15
				<u> </u>	
	If two married people are filing together, b out, number the entries, and attach it to th				
number (if known).	out, number the entries, and attach it to th	is ioiiii. Oii	the top of any addition	nai pages, write your na	ille allu case
1. Do any creditors have claims secured b	y your property?				
	this form to the court with your other sch	edules Yo	u have nothing else t	o report on this form	
<u> </u>	•	caalco. 10	a nave nothing clock	o report on the form.	
Yes. Fill in all of the information	below.				
Part 1: List All Secured Claims					
	more than one secured claim, list the creditor		Column A	Column B	Column C
	s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name.		Amount of claim Do not deduct the	Value of collateral	Unsecured
much as possible, list the claims in alphabet			value of collateral.	that supports this claim	portion If any
2.1 CALIBER HOME LOANS	Describe the property that secures the c	laim:	\$278,104.16	\$286,137.54	\$0.00
Creditor's Name	8001 Wesley Dr Golden Valley,	MN			
	55427 Hennepin County				
	Legally described as: Lot 1, Blo	ck 2,			
	Golden Oaks Second Addition,				
	Hennepin County, Minnesota.				
	In redemption period. Tax value				
	\$232,000.00. Sheriff's sale bid v \$286,137.54.	was			
13801 WIRELESS WAY	As of the date you file, the claim is: Check	k all that			
OKLAHOMA CITY, OK	apply.	it all that			
73134-2500	Contingent				
Number, Street, City, State & Zip Code	Unliquidated				
	Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as morto car loan)	gage or secu	ıred		
Debtor 2 only					
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechani	ic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a	Other (including a right to offset)	RTGAG	Ξ		
community debt					
Date debt was incurred 2006	Last 4 digits of account number	6253			
2.2 CALIBER HOME LOANS	Describe the property that secures the c	laim:	\$84,534.00	\$286,137.54	\$76.500.62
Creditor's Name	8001 Wesley Dr Golden Valley,		ψοτ,σοτ.σο	Ψ200,107.04	Ψ10,000.02
	55427 Hennepin County	WIIN			
	Legally described as: Lot 1, Blo	ck 2.			
	Golden Oaks Second Addition,	-, ,			
	Hennepin County, Minnesota.				
	In redemption period. Tax value				
	\$232,000.00. Sheriff's sale bid	was			
13801 WIRELESS WAY	\$286,137.54.	k all that			
	AS OF THE DATE VOILTILE THE CIAIM IS, Chook				

OKLAHOMA CITY, OK 73134-2500

☐ Contingent

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 21 of 67

Debtor 1 Anna H Babington-John	ison	Case number (if know)		
First Name Middle Na	ame Last Name			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Number, Street, Oity, State & Zip Sode	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or	secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) MORTGA	AGE		
Date debt was incurred 2006	Last 4 digits of account number 626	1		
2.3 CHASE AUTO FINANCE	Describe the property that secures the claim:	\$3,416.00	\$500.00	\$2,916.00
Creditor's Name	2002 Land Rover Range Rover			
	200,000 miles			
	Has \$7,000 in work needed to get it			
PO BOX 901076	in running condition. As of the date you file, the claim is: Check all that			
FT WORTH, TX	AS Of the date you file, the claim is: Check all that apply.			
76101-2076	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or	secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
•				
Date debt was incurred 2008	Last 4 digits of account number			
2.4 KLATT AUGUSTINE SAYER	Describe the property that secures the claim:	\$0.00	\$286,137.54	\$0.00
Creditor's Name	8001 Wesley Dr Golden Valley, MN			
	55427 Hennepin County			
	Legally described as: Lot 1, Block 2,			
	Golden Oaks Second Addition,			
	Hennepin County, Minnesota.			
	l			
	In redemption period. Tax value is \$232,000.00. Sheriff's sale bid was			
TREINEN & RASTEDE,	\$286,137.54.			
PC	As of the date you file, the claim is: Check all that			
925 E 4TH ST WATERLOO, IA 50703	apply.			
	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortgage or	secured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	EY FOR CALIBER HON	ME LOAN	
Date debt was incurred 2016	Last 4 digits of account number			

\$366,054.16

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 22 of 67

Debtor 1	Anna H Babington-Johnson			Case number (if know)	
	First Name	Middle Name	Last Name		
Add the	dollar value of y	our entries in Column A on	this page. Write that number here:		
If this is	this is the last page of your form, add the dollar value totals from all pages.			\$366,054,16	.]
Write th	at number here:			\$300,034.10	·

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 23 of 67

		Document	Page	23 of 6	7		
Fill in this infor	mation to identify your ca	ase:					
Debtor 1	Anna H Babington-	Johnson					
	First Name	Middle Name	Last Nam	ie			
Debtor 2	Ti AN	Add I III All					
(Spouse if, filing)	First Name	Middle Name	Last Nam	ie			
United States Ba	ankruptcy Court for the:	DISTRICT OF MINNESOTA					
Case number							
(if known)						☐ Check	if this is an
						amend	led filing
Official Forr	m 106E/E						
		o Have Unsecured	Claim	•			12/15
		Part 1 for creditors with PRIORIT			m anaditana with NON	IDDIODITY eleime Li	
Schedule D: Creditel. Attach the Contains and case nu	tors Who Have Claims Secur ntinuation Page to this page mber (if known).	ed Leases (Official Form 106G). Deed by Property. If more space is a lift you have no information to rep	needed, co	ppy the Part	you need, fill it out,	number the entries i	n the boxes on the
	All of Your PRIORITY Uns						
No. Go to F	ors have priority unsecured	ciaims against you?					
Yes.	Pail 2.						
identify what ty possible, list th	/pe of claim it is. If a claim has ne claims in alphabetical order	If a creditor has more than one prio both priority and nonpriority amoun according to the creditor's name. If cular claim, list the other creditors in	its, list that you have n	claim here ar	nd show both priority a	and nonpriority amoun	ts. As much as
(For an explan	ation of each type of claim, se	e the instructions for this form in the	e instructior	n booklet.)	Total claim	Priority amount	Nonpriority amount
2.1 INTERN	NAL REVENUE SERVI	CE Last 4 digits of accou	ınt number		\$281,187.0 0	£204 407 00	\$0.00
CENTR OPS	reditor's Name RALIZED INSOLVENCY	When was the debt in	curred?	2011,20	13	-	
PO BO	X 7346 DELPHIA, PA 19101-73	46					
	Street City State Zlp Code	As of the date you file	e, the claim	is: Check al	I that apply		
Who incurre	ed the debt? Check one.	☐ Contingent					
Debtor 1	only	☐ Unliquidated					
Debtor 2	only	☐ Disputed					
Debtor 1	and Debtor 2 only	Type of PRIORITY uns	secured cla	aim:			
	ne of the debtors and another	☐ Domestic support of	bligations				
	this claim is for a communit	y debt Taxes and certain o	other debts	you owe the	government		
	subject to offset?	☐ Claims for death or					
■ No		☐ Other. Specify					
☐ Yes			AX LIENS	S			

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 24 of 67

Debtor 1 Anna H Babington-Johnson			Case num	ber (if know)		
2.2 MN DEPT OF	REVENUE	Last 4 digits of account number		\$69,432.00	\$69,432.00	\$0.00
Priority Creditor's 551 BKY SEC PO BOX 6444 ST PAUL, MN	TION CEU Dept 7	When was the debt incurred?	2013,2017			
Number Street Cit		As of the date you file, the claim	is: Check all tha	at apply		
Who incurred the de	bt? Check one.	☐ Contingent				
■ Debtor 1 only		☐ Unliquidated				
Debtor 2 only		☐ Disputed				
Debtor 1 and Deb	or 2 only	Type of PRIORITY unsecured cla	nim:			
☐ At least one of the		☐ Domestic support obligations				
☐ Check if this clai Is the claim subject ■ No ☐ Yes	m is for a community debt to offset?	■ Taxes and certain other debts of Claims for death or personal in Other. Specify STATE TA	ury while you we			
Part 2: List All of Yo	our NONPRIORITY Unsecu	red Claims				
unsecured claim, list th	e creditor separately for each cla	alphabetical order of the creditor aim. For each claim listed, identify w creditors in Part 3.lf you have more to	nat type of claim	it is. Do not list claim	ns already included in F	Part 1. If more
					Total c	laim
4.1 BOSTON SCI	ENTIFIC CORP	Last 4 digits of account numb	er			\$57,593.00
Nonpriority Credite HALPERN AT 10 SOUTH 5T MPLS, MN 55	TORNEYS AT LAW H ST #400	When was the debt incurred?	2012			
Number Street Cit		As of the date you file, the cla	im is: Check all	that apply		
Who incurred the	debt? Check one.					
■ Debtor 1 only		☐ Contingent				
☐ Debtor 2 only		☐ Unliquidated				
Debtor 1 and D	ebtor 2 only	☐ Disputed				
☐ At least one of	the debtors and another	Type of NONPRIORITY unsec	ured claim:			
	claim is for a community	☐ Student loans				
debt Is the claim subje	ect to offset?	Obligations arising out of a s report as priority claims	eparation agree	ment or divorce that	you did not	
■ No		☐ Debts to pension or profit-sh	aring plans, and	other similar debts		
☐ Yes		■ Other. Specify JUDGMI	ENT			

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 25 of 67

Debt	OF 1 Anna H Babington-Johnson	Case number (if know)	
4.2	CAPITAL ONE MASTERCARD	Last 4 digits of account number 5483	\$2,180.00
	Nonpriority Creditor's Name 6125 LAKEVIEW RD SUITE 800	When was the debt incurred? 2010	_
	CHARLOTTE, NC 28269-2605 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify JUDGMENT	_
4.3	CHASE AUTO FINANCE Nonpriority Creditor's Name	Last 4 digits of account number	\$3,416.00
	Nonpholity Creditor 3 Name	When was the debt incurred? 2008	
	PO BOX 901076 FT WORTH, TX 76101-2076 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	_
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify LOAN	_
4.4	LOAN MAX	Last 4 digits of account number 7060	\$6,556.00
	Nonpriority Creditor's Name 1409 COULEE RD HUDSON, WI 54016	When was the debt incurred? 2014	_
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset? ■ No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other, Specify REPO	

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 26 of 67

Anna H Babington-Johnson	Case number (if know)	
PORTFOLIO RECOVERY ASSOCIATES	Last 4 digits of account number	\$13,066.00
Nonpriority Creditor's Name PO BOX 41067 NORFOLK, VA 23541-1067	When was the debt incurred? 2008	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify JUDGMENT	
PREMIER MOVING	Last 4 digits of account number 6820	\$6,140.00
Nonpriority Creditor's Name 2468 LOUISIANA AVE N GOLDEN VALLEY, MN 55427	When was the debt incurred? 2015	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify SERVICES	
THE BANK OF NEW YORK MELLON	Last 4 digits of account number	\$442.00
Nonpriority Creditor's Name METRO LEGAL SVC INC 330 2ND AVE S #150	When was the debt incurred? 2017	
MPLS, MN 55401		
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed Type of NONPRIORITY unsequed claim:	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	□ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify JUDGMENT	

Official Form 106 E/F

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 27 of 67

Deptor 1	Anna H B	abington-Johnson		Case n	umber (if know)	
		N LINES LLC	Last 4 digits of account number	er		\$57,593.00
(6681 COUN	.AW MARK MILLER TRY CLUB DR	When was the debt incurred?	2012		
Ī	Number Street C	ALLEY, MN 55427 City State Zlp Code he debt? Check one.	As of the date you file, the clai	m is: Check	all that apply	
	Debtor 1 only	у	☐ Contingent			
	Debtor 2 only	у	☐ Unliquidated			
	Debtor 1 and	d Debtor 2 only	☐ Disputed			
	☐ At least one	of the debtors and another	Type of NONPRIORITY unsecu	red claim:		
	☐ Check if this	s claim is for a community	☐ Student loans			
	debt Is the claim sub	bject to offset?	Obligations arising out of a sereport as priority claims	eparation ag	reement or divorce that you did not	
	No	bject to onset:	Debts to pension or profit-sha	aring plans.	and other similar debts	
	■ No □ Yes		■ Other. Specify JUDGME		and only online dobto	
			Other. Specify			
	VICTOR INC		Last 4 digits of account number	er		\$5,919.00
	1600 S 3RD SANFORD,	ST	When was the debt incurred?	2013		
Ī	Number Street C	City State ZIp Code he debt? Check one.	As of the date you file, the claim	m is: Check	all that apply	
	Debtor 1 only	у	☐ Contingent			
	Debtor 2 only	у	☐ Unliquidated			
	Debtor 1 and	d Debtor 2 only	☐ Disputed			
	☐ At least one	of the debtors and another	Type of NONPRIORITY unsecu	red claim:		
	☐ Check if this	s claim is for a community	☐ Student loans			
	debt Is the claim sub	bject to offset?	Obligations arising out of a se report as priority claims	eparation ag	reement or divorce that you did not	
	No		Debts to pension or profit-sha	aring plans,	and other similar debts	
	☐ Yes		Other. Specify JUDGME	NT		
Part 3:			bt That You Already Listed			
is tryin have m	g to collect from	m you for a debt you owe to so	about your bankruptcy, for a debt that omeone else, list the original crediton at you listed in Parts 1 or 2, list the ac or submit this page.	r in Parts 1	or 2, then list the collection agency	here. Similarly, if you
	d Address		On which entry in Part 1 or Part 2 did y		•	
	ΓEL CHARG OUNTRY CL		Line 4.2 of (Check one):		Creditors with Priority Unsecured Clair	
	EN VALLEY,	-		■ Part 2:	Creditors with Nonpriority Unsecured	Claims
			Last 4 digits of account number			
Part 4:	Add the An	nounts for Each Type of U	nsecured Claim			
	he amounts of dunsecured cla	· · · · · · · · · · · · · · · · · · ·	ims. This information is for statistica	al reporting	purposes only. 28 U.S.C. §159. Add	I the amounts for each
	0.	Demostic comment abilities	_	0-	Total Claim	
	6a. otal ims	Domestic support obligation	s	6a.	\$	
from Pa	rt 1 6b.	Taxes and certain other debt		6b.	\$ 350,619.00	
	6c.		injury while you were intoxicated	6c.	\$ 0.00	
	6d.	other. Add all other priority un	secured claims. Write that amount here	. 6d.	\$ 0.00	
	6e.	Total Priority. Add lines 6a thr	ough 6d.	6e.	\$350,619.00	

Total Claim

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 28 of 67

Debtor 1 Anna H Babington-Johnson

Case number (if know)

_				` ,		
Total		Student loans	6f.	\$	0.00	
claims						
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00	
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	152,905.00	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	152,905.00	

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 29 of 67

Fill in this infor	mation to identify your	case:	J	
Debtor 1	Anna H Babingto	n-Johnson		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF MINNES	ОТА	
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.2					<u> </u>
	Name				
	Number	Street			_
	City		State	ZIP Code	-
2.3			Otato		
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	Jity		Otato		

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 30 of 67

Fill in this	information to identify your	case:	nt rage oo or	
Debtor 1	Anna H Babingto	n-Johnson		
Dahtar 0	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, fili	ng) First Name	Middle Name	Last Name	
United Sta	ates Bankruptcy Court for the:	DISTRICT OF MINNES	ОТА	
Case num (if known)	ber			☐ Check if this is an amended filing
	l Form 106H Iule H: Your Cod	ebtors		12/15
people are fill it out, a your name	filing together, both are equ	ally responsible for supp boxes on the left. Attach Answer every question	olying correct information the Additional Page to	complete and accurate as possible. If two married on. If more space is needed, copy the Additional Page, this page. On the top of any Additional Pages, write as a codebtor.
■ No		,		
Arizon	hin the last 8 years, have you na, California, Idaho, Louisiana . Go to line 3. s. Did your spouse, former spo	, Nevada, New Mexico, Pu	erto Rico, Texas, Washir	? (Community property states and territories include gton, and Wisconsin.)
in line Form	2 again as a codebtor only	f that person is a guaran	tor or cosigner. Make s	f your spouse is filing with you. List the person shown ure you have listed the creditor on Schedule D (Official G). Use Schedule D, Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
_	Name Street			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line
	Number Street City	State	ZIP Code	
3.2	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line
	Number Street City	State	ZIP Code	

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 31 of 67

Eill	in this information to	a idantify your o	200:									
	otor 1		ington-Johnson									
	otor 2 ouse, if filing)						_					
Uni	ted States Bankrupt	tcy Court for the	: DISTRICT OF MINNE	SOTA			_					
Case number (If known)								Check if this is: An amended filing A supplement showing postpetition chains in the following date:				
0	fficial Form	106I						M	M / DD/ Y	YYY		
S	chedule I: `	Your Inc	ome									12/15
spo atta	use. If you are seponded a separate sheet the Describe Fill in your employers.	arated and you et to this form. Employment	are married and not filing wing the spouse is not filing wing wing the top of any additions.	th you, o	do not include jes, write your	inform	natio	n about	your spo mber (if	ouse. If known)	more space is . Answer ever	s needed, y question
	information.			Debtor 1					Debtor 2 or non-filing spouse			•
	If you have more t attach a separate information about	page with	Employment status	■ Employed□ Not employed					■ Employed□ Not employed			
	employers.		Occupation	Self Employed Diversity Connection, LLC				Non Profit Manager Stairstep Foundation				
	Include part-time, self-employed wor		Employer's name									
	Occupation may ir or homemaker, if i		Employer's address									
			How long employed to	nere?	17 years				_2	5 year	s	
Pai	t 2: Give Det	ails About Mor	nthly Income									
	mate monthly inco		ate you file this form. If y	you have	nothing to repo	ort for a	ny li	ne, write	\$0 in the	space.	Include your n	on-filing
	ou or your non-filing : e space, attach a se		ore than one employer, co	mbine th	ne information fo	or all er	mplo	yers for t	hat perso	on the	e lines below. I	f you need
								For Deb	tor 1		Debtor 2 or filing spouse	
2.			ry, and commissions (becalculate what the month)			2.	\$_		0.00	\$	7,917.00	<u>)</u>
3.	Estimate and list	monthly overt	ime pay.			3.	+\$_		0.00	+\$_	0.00	<u> </u>
1	Calculate gross I	Incomo Add lir	2 1 line 2			4	Ф		0.00	Ф	7 017 00	7

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 32 of 67

Debt	or 1	Anna H Babington-Johnson		С	Case number (if	known)				
	Con	y line 4 here	4.		For Debtor 1	0.00		r Debtor n-filing s		
_	-				<u> </u>	0.00	· · ·		017.00	<u>-</u>
5.	5a. 5b.	all payroll deductions: Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a 5b		\$	0.00	\$_ \$_	1,	933.00 0.00	<u>)</u>
	5c. 5d. 5e. 5f.	Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations	5c. 5d. 5e. 5f.		\$ \$ \$ \$	0.00 0.00 0.00 0.00	\$_ \$_ \$_ \$_		0.00 0.00 0.00	<u>)</u>)
	5g. 5h.	Union dues Other deductions. Specify:	5g 5h		\$ \$	0.00	\$ + \$		0.00)
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	;	\$	0.00	\$	1,	933.00	<u> </u>
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	;	\$	0.00	\$_	5,	984.00)
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
	٥L	monthly net income.	8a		\$	0.00	\$_		0.00	_
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8b.		\$ \$	0.00	\$_ \$		0.00	
	8d.	Unemployment compensation	8c. 8d		\$	0.00	- \$ \$		0.00	_
	8e.	Social Security	8e		\$	0.00	\$		0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0.00	\$_		0.00	<u> </u>
	8g.	Pension or retirement income	8g		\$	0.00	\$_		0.00	
	8h.	Other monthly income. Specify:	_ 8h	.+	\$	0.00	+ \$_		0.00	<u>) </u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	<u> </u>	0.00	\$_		0.0	00
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	0.00	+ \$	5,	984.00	= \$	5,984.00
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe					Schedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies						e. 12.	\$	5,984.00
13.	Do y	ou expect an increase or decrease within the year after you file this form	?						Comb month	ined ily income
		No. Yes. Explain: Her business has generated no net income or reversely remedy this soon but is unsure if or when she wi								nopes to

Official Form 106I Schedule I: Your Income page 2

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 33 of 67

Fill in this infor	mation to identify ye	our case:					
Debtor 1	Anna H Bab	ington-Jo	ohnson		Chec	ck if this is:	
Debtor 2 (Spouse, if filing)						An amended filing A supplement show 13 expenses as of	ving postpetition chapter the following date:
		: DISTRI	CT OF MINNESOTA			MM / DD / YYYY	
Case number	annuapto, Court for uno		0. 0			, 22 ,	
(If known)							
Official F	Form 106J						
Schedu	le J: Your	Exper	ises				12/1
information. It		eded, atta	If two married people ar ch another sheet to this n.				
	scribe Your House joint case?	ehold					
-	o to line 2.						
	Does Debtor 2 live	in a separ	ate household?				
] No						
	Yes. Debtor 2 mu	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of Deb	tor 2.	
2. Do you h	nave dependents?	■ No					
Do not lis Debtor 2.	t Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
Do not sta							□ No
depender	nts names.						☐ Yes ☐ No
							☐ Yes
							□ No
							☐ Yes
							□ No
_							☐ Yes
	expenses include s of people other t	han 📕	No				
	and your depende		Yes				
Part 2 ⁻ Fs	timate Your Ongoi	na Monthi	v Fynenses				
Estimate your	r expenses as of y of a date after the	our bankrı	uptcy filing date unless y y is filed. If this is a supp	ou are using this followed	orm as a su J, check th	pplement in a Cha ne box at the top o	pter 13 case to report f the form and fill in the
			government assistance is sluded it on Schedule I: Y				
(Official Form						Your expe	enses
	al or home owners and any rent for th		ses for your residence. In	nclude first mortgage	4. \$	·	1,450.00
If not inc	luded in line 4:						
4a. Re	al estate taxes				4a. \$	}	0.00
	operty, homeowner'				4b. \$		0.00
	me maintenance, re				4c. \$		100.00
	meowner's associa		dominium dues our residence, such as ho	mo oquity loans	4d. \$ 5. \$		0.00

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 34 of 67

Debtor 1 _	Anna H Babington-Johnson	Case num	ber (if known)	
6. Utiliti e	es:			
6a.	Electricity, heat, natural gas	6a.	\$	250.00
6b.	Water, sewer, garbage collection	6b.	\$	120.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	200.00
6d.	Other. Specify:	6d.	\$	0.00
7. Food	and housekeeping supplies	7.	\$	600.00
	care and children's education costs	8.	\$	0.00
	ing, laundry, and dry cleaning	9.	\$	150.00
	nal care products and services	10.	·	120.00
	al and dental expenses	11.	·	220.00
	portation. Include gas, maintenance, bus or train fare.		<u> </u>	220.00
	t include car payments.	12.	\$	450.00
	tainment, clubs, recreation, newspapers, magazines, and books	13.	\$	60.00
	table contributions and religious donations	14.	\$	600.00
5. Insura	<u> </u>		· 	
Do no	t include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
15b.	Health insurance	15b.	\$	0.00
15c.	Vehicle insurance	15c.	\$	813.00
15d.	Other insurance. Specify:	15d.	·	0.00
	5. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Specif		16.	\$	0.00
	Iment or lease payments:		· —	
	Car payments for Vehicle 1	17a.	\$	0.00
	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify: Husband's car loan	17c.	\$	649.00
	Other. Specify: Husband's life insurance	17d.	·	400.00
	Husband's loan payments		\$	1,635.00
	payments of alimony, maintenance, and support that you did not report a		<u> </u>	1,033.00
	cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
	payments you make to support others who do not live with you.	•	\$	0.00
Specif	• • • • • • • • • • • • • • • • • • • •	19.	· —	
	real property expenses not included in lines 4 or 5 of this form or on Sch	nedule I: Yo	our Income.	
	Mortgages on other property	20a.		0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	Homeowner's association or condominium dues	20e.	·	0.00
21. Other :		21.	,	0.00
ouici.	. Оробну.		ΙΨ	0.00
	late your monthly expenses			
22a. A	dd lines 4 through 21.		\$	7,817.00
22b. C	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. A	dd line 22a and 22b. The result is your monthly expenses.		\$	7,817.00
	, , ,		· —	.,0.7100
	late your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	5,984.00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	7,817.00
	Subtract your monthly expenses from your monthly income.	225	¢	-1,833.00
	The result is your monthly net income.	23c.	\$	-1,000.00
A Dovo	u expect an increase or decrease in your expenses within the year after y	ou file this	form?	
For eve	iu expect an increase or decrease in your expenses within the year after y ample, do you expect to finish paying for your car loan within the year or do you expect you	ur mortaaae i	o rorring payment to increase	or decrease because of a
. 0. 0.0	eation to the terms of your mortgage?	mortgage	, mont to morease	5. Goologoo boodago oi a
modific	, 5 5			
■ No.		ico diirina	a thic radamst	on pariod
		use durinç	g this redempti	on period.

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 35 of 67

Fill in this infor	rmation to identify your	case:			
Debtor 1					
Deptor I	Anna H Babingto	n-Jonnson Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	DISTRICT OF MINNESO	ГА		
Case number					
(if known)					Check if this is an amended filing
Official For		المنائية المامي	Dobtorio So	hadulaa	
Declara	tion About a	ın Individual I	Deptor's Sc	neaules	12/15
years, or both. 1	ľ8 U.S.C. §§ 152, 1341, 1 gn Below			n fines up to \$250,000, or imp	·
Did you pa	ay or agree to pay some	one who is NOT an attorne	ey to help you fill out b	ankruptcy forms?	
■ No					
☐ Yes.	Name of person				etition Preparer's Notice, nature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the summ	ary and schedules filed	d with this declaration and	
X /s/ Δn	na H Babington-John	son	Х		
Anna	H Babington-Johnson ure of Debtor 1		Signature of I	Debtor 2	
Date	May 3, 2017		Date		

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 36 of 67

Fill in	this infor	nation to identify you	r case:			
Debto		Anna H Babingt				
5.1.		First Name	Middle Name	Last Name		
Debto (Spouse	r 2 if, filing)	First Name	Middle Name	Last Name		
United	States Ba	nkruptcy Court for the:	DISTRICT OF MINNESO	TA		
Case	number					
(if knowr	n)					Check if this is an amended filing
	-					amonaca ming
		rm 107	Affairs for Individ	duals Eiling for F	Pankruptav	4/10
Be as o	complete a ation. If n er (if know	and accurate as possi nore space is needed, n). Answer every que	ible. If two married people a	are filing together, both are this form. On the top of an	e equally responsible for su	
		r current marital statu				
	Married					
	Not ma					
2. D	uring the I	ast 3 years, have you	lived anywhere other than	where you live now?		
	l No					
	Yes. Lis	st all of the places you l	ived in the last 3 years. Do no	ot include where you live no	w.	
D	ebtor 1 P	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there
	923 Fren Iinneapo	nont Avenue North lis, MN	From-To: During the las years, on and		1	☐ Same as Debtor 1 From-To:
	and territor No Yes. Ma	<i>ies</i> include Árizona, Ca	ver live with a spouse or leg lifornia, Idaho, Louisiana, Ner thedule H: Your Codebtors (Of Ir Income	vada, New Mexico, Puerto f	, , ,	
Fi	II in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including par	t-time activities.	lendar years?
	l No					
	Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year untiled for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	
			Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 37 of 67

Deb	tor 1 _ A	Anna H Bab	ington-Johi	nson	Cas	e number (if known)		
				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco Check all that ap		Gross income (before deductions and exclusions)
		endar year: o December	31, 2016)	☐ Wages, commissions, bonuses, tips	\$11,586.00	☐ Wages, comn bonuses, tips	nissions,	
				Operating a business		☐ Operating a b	usiness	
		ndar year be o December		☐ Wages, commissions, bonuses, tips	\$126,470.00	☐ Wages, comn bonuses, tips	nissions,	
				Operating a business		☐ Operating a b	usiness	
	winnings List each	s. If you are fil	ing a joint cas	pensions; rental income; inter e and you have income that y me from each source separat	ou received together, list it o	only once under Deb	otor 1.	a gambing and lottery
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco	ome	Gross income (before deductions and exclusions)
Part	3: Li	st Certain Pa	ayments You	Made Before You Filed for I	Bankruptcy			
	Are eith □ No. □ Yes	Neither D individual During the No. Yes * Subject	ebtor 1 nor D primarily for a e 90 days befo Go to line 7 List below e paid that cre not include to adjustment or Debtor 2 o	s debts primarily consumer bettor 2 has primarily consumer personal, family, or household re you filed for bankruptcy, diesect creditor to whom you paireditor. Do not include payment payments to an attorney for the on 4/01/19 and every 3 years to both have primarily consumer you filed for bankruptcy, diesect of 2 has primarily consumer you filed for bankruptcy, diesect of 2 has primarily consumer you filed for bankruptcy, diesect of 2 has primarily consumer you filed for bankruptcy, diesect of 2 has primarily consumer you filed for bankruptcy, diesect of 2 has primarily consumer you filed for bankruptcy, diesect of 2 has primarily consumer you filed for bankruptcy, diesect of 2 has primarily consumer you filed for bankruptcy, diesect of 2 has primarily consumer you filed for bankruptcy, diesect of 2 has primarily consumer you filed for bankruptcy, diesect of 2 has primarily consumer you filed for bankruptcy, diesect of 2 has primarily consumer you filed for bankruptcy, diesect of 2 has primarily consumer you filed for bankruptcy, diesect of 2 has primarily consumer you filed for bankruptcy, diesect of 2 has primarily consumer you filed for bankruptcy, diesect of 2 has primarily consumer you filed for bankruptcy, diesect of 2 has primarily consumer you filed for bankruptcy, diesect of 2 has primarily consumer you filed for bankruptcy.	Imer debts. Consumer debt d purpose." d you pay any creditor a total d a total of \$6,425* or more in this for domestic support obligations bankruptcy case. Is after that for cases filed on Imer debts.	il of \$6,425* or more in one or more payn gations, such as chil or after the date of	e? nents and th d support ar	ne total amount you nd alimony. Also, do
		■ No.	Go to line 7					
		☐ Yes	List below e include pay	each creditor to whom you pai ments for domestic support ol this bankruptcy case.				
	Credito	or's Name an	d Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this p	ayment for

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 38 of 67

Del	btor 1	Anna H Babington-Johnson	Document	Cas	se number (if known)		
7.	<i>Inside</i> of whi	n 1 year before you filed for bankrupters include your relatives; any general puch you are an officer, director, person in these you operate as a sole proprietor.	artners; relatives of any ger n control, or owner of 20% of	neral partners; partne or more of their voting	erships of which yo g securities; and a	u are a genera ny managing a	al partner; corporatior agent, including one for
		No ⁄ es. List all payments to an insider.					
	Insid	ler's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
3.	inside Includ	e payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a d	ebt that benefited ar
		es. List all payments to an insider ler's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
				paid	still owe	Include cred	ditor's name
z.	List al modifi	n 1 year before you filed for bankrupt I such matters, including personal injury ications, and contract disputes. No Yes. Fill in the details.					
	Case	e title e number	Nature of the case	Court or agency		Status of th	ne case
10.	Check	n 1 year before you filed for bankrupt call that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below.		erty repossessed, f	oreclosed, garnis	shed, attached	d, seized, or levied?
	Cred	itor Name and Address	Describe the Property Explain what happene	d	Date		Value of the property
	1380	IBER HOME LOANS 01 WIRELESS WAY AHOMA CITY, OK 73134-2500	Her homestead was sheriff's sale on Nov now in redemption. Property was repossed Property was foreclosed Property was garnish Property was attached	foreclosed upon vember 4, 2016, it essed. sed. ned.		16	\$280,000.00
		nMax son, WI	Her 2002 Jaguar S-t by LoanMax for non title loan.			ch, 2017	\$1,000.00

☐ Property was attached, seized or levied.

■ Property was repossessed.□ Property was foreclosed.□ Property was garnished.

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 39 of 67

Debtor 1 Anna H Babington-Johnson Case number (if known)

11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.								
	Creditor Name and Address	De	escribe the action the creditor took	Date action was taken	Amount				
12.	Within 1 year before you filed for bankru court-appointed receiver, a custodian, or □ No □ Yes		vas any of your property in the possession of an a er official?	assignee for the bend	efit of creditors, a				
Pai	rt 5: List Certain Gifts and Contribution	s							
13.	Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift.	uptcy,	did you give any gifts with a total value of more t	han \$600 per person	?				
	Gifts with a total value of more than \$60 per person	0	Describe the gifts	Dates you gave the gifts	Value				
	Person to Whom You Gave the Gift and Address:								
14.	Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift or c		did you give any gifts or contributions with a tota	Il value of more than	\$600 to any charity?				
	Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal	Describe what you contributed	Dates you contributed	Value				
Pai	rt 6: List Certain Losses								
15.	Within 1 year before you filed for bankru or gambling?	ptcy or	since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster				
	□ No								
	Yes. Fill in the details.	_							
	Describe the property you lost and how the loss occurred	Include	ibe any insurance coverage for the loss e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost				
	She has had gambling losses in excess of any gambling winnings during the last 1 year.			Last 12 months	Unknown				
Pai	rt 7: List Certain Payments or Transfers								
	Within 1 year before you filed for bankru consulted about seeking bankruptcy or p	ptcy, d orepari	id you or anyone else acting on your behalf pay on gabankruptcy petition? rs, or credit counseling agencies for services required		rty to anyone you				
	□ No■ Yes. Fill in the details.								
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	'ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment				
	Prescott Pearson & Tande, PA Po Box 120088 New Brighton, MN 55112-0088		Paid \$335.00 court filng fee and \$1500.00 attorney fee for bankruptcy	5/1/17	\$1,835.00				

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 40 of 67

Debtor 1 Anna H Babington-Johnson

Case number (if known)

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and variansferred	Description and value of any property transferred Date paymer or transfer with made			
	101CREDITCOUNSELING.COM	\$14.95 credit co	\$14.95 credit counseling fee			\$14.95
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors. Do not include any payment or transfer that you No	s or to make payments			or transfer any proper	ty to anyone who
	Yes. Fill in the details.					
	Person Who Was Paid Address	Description and variansferred	value of any pro	perty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptor transferred in the ordinary course of your burnclude both outright transfers and transfers made	siness or financial affa de as security (such as	airs? the granting of a			
	include gifts and transfers that you have already■ No□ Yes. Fill in the details.					
	Person Who Received Transfer Address Person's relationship to you	Description and v property transfer			any property or s received or debts xchange	Date transfer was made
19.	Within 10 years before you filed for bankrupte beneficiary? (These are often called asset-protein No Yes. Fill in the details.		ny property to a	self-settled t	rust or similar device o	of which you are a
	Name of trust	Description and	value of the prop	erty transfer	red	Date Transfer was made
	List of Certain Financial Accounts, Inst	•	·			
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ	other financial accou	nts; certificates	of deposit; s		
	■ No □ Yes. Fill in the details.	auons, and other illia	nciai msututions	5.		
				oved, or	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed fo	r bankruptcy, an	y safe depos	sit box or other deposi	tory for securities,
	■ No					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the	e contents	Do you still have it?

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 41 of 67

Debtor 1 Anna H Babington-Johnson

Case number (if known)

22.	Have you stored property in a storage unit or pla	ace other than your home within	1 year	r before you filed for bankruptcy	?
	No				
	Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City,	Des	scribe the contents	Do you still have it?
		State and ZIP Code)			
Par	t 9: Identify Property You Hold or Control for S	Someone Else			
23.	Do you hold or control any property that someon for someone.	ne else owns? Include any prope	rty yo	ou borrowed from, are storing for	, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Des	scribe the property	Value
Par	t 10: Give Details About Environmental Informa	•			
For	the purpose of Part 10, the following definitions a	apply:			
	Environmental law means any federal, state, or letoxic substances, wastes, or material into the air regulations controlling the cleanup of these sub	r, land, soil, surface water, grour			
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal s	-	law,	whether you now own, operate,	or utilize it or used
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or si		s was	ste, hazardous substance, toxic s	substance,
Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of whe	en the	y occurred.	
24.	Has any governmental unit notified you that you	may be liable or potentially liabl	e und	er or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)		Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)		Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or administ	trative proceeding under any en	/ironn	nental law? Include settlements a	and orders.
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the case	Status of the case
Par	t 11: Give Details About Your Business or Conr	nections to Any Business			
27.	Within 4 years before you filed for bankruptcy, d	id you own a business or have a	ny of	the following connections to any	business?
	☐ A sole proprietor or self-employed in a tr	ade, profession, or other activity	, eith	er full-time or part-time	
	■ A member of a limited liability company	(LLC) or limited liability partners	hip (L	LP)	

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 42 of 67

Debtor 1 Anna H Babington-Johnson

Case number (if known)

		☐ A partner in a partnership							
		☐ An officer, director, or managing ex	recutive of a corporation						
		_	ng or equity securities of a corporation						
		No. None of the above applies. Go to							
	_								
	Bu/	Yes. Check all that apply above and till siness Name	Describe the nature of the business	Employer Identification number					
	Add	dress Name dress nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.					
	Div	rersity Connection, LLC	She owns Diversity Connection, LLC, which is an event planning and production company. No income during 2017. Business location is 2525 Nevada Avenue North, Suite 306. This is a rental office location. They have one show scheduled to happen in June, and one in September. After show expenses are paid, she expects only enough net revenue to be able to catch up on business expenses and rent. Assets: Wells Fargo Bank Checking \$ Debts: Landlord \$5250; Utilities \$800; No net	Dates business existed EIN: From-To 2000 to present					
28.	insti _	nin 2 years before you filed for bankrup tutions, creditors, or other parties.	tcy, did you give a financial statement to an	nyone about your business? Include all financial					
		Yes. Fill in the details below.							
		ne Iress nber, Street, City, State and ZIP Code)	Date Issued						
Par	12:	Sign Below							
are t	rue a a ba	and correct. I understand that making a		declare under penalty of perjury that the answers btaining money or property by fraud in connection rs, or both.					
An	na H	a H Babington-Johnson Babington-Johnson re of Debtor 1	Signature of Debtor 2						
Dat	e N	May 3, 2017	Date						
Did : ■ N □ Y	0	attach additional pages to Your Statem	ent of Financial Affairs for Individuals Filing	g for Bankruptcy (Official Form 107)?					
o		407	neut of Cinemaiol Affaire for Individuals City of the	Dankerintari					

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 43 of 67

Debtor 1 Anna H Babington-Johnson Case number (if known)

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

□ Yes. Name of Person

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 44 of 67

Fill in this inform	nation to identify your	case:			
Debtor 1	Anna H Babingto				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	DISTRICT OF MI	NNESOTA		
Casa numbar					
Case number(if known)					☐ Check if this is an amended filing
Official Fo	moo 100				
Official Fo Statemen		n for Indiv	riduals Filing Under	Chapter	7 12/15
			<u> </u>	1	
	vidual filing under cha	-	I out this form if:		
	claims secured by yo				
You must file this	ver is earlier, unless th	ithin 30 days after	ot expired. you file your bankruptcy petition or e time for cause. You must also send		
•	ople are filing togethe	r in a joint case, bo	th are equally responsible for supply	ying correct infor	mation. Both debtors must
Be as complete a	and accurate as possib	ole. If more space is	s needed, attach a separate sheet to	this form. On the	top of any additional pages,
write yo	our name and case nur	nber (if known).	•		. , ,
Part 1: List Yo	our Creditors Who Have	e Secured Claims			
1. For any credito	ors that you listed in Pa	art 1 of Schedule D	: Creditors Who Have Claims Secure	ed by Property (O	fficial Form 106D), fill in the
information be Identify the cre	low. editor and the property t	hat is collateral	What do you intend to do with the secures a debt?	property that	Did you claim the property as exempt on Schedule C?
Creditor's C	ALIBER HOME LOA	NS	☐ Surrender the property.		□No
name:			■ Retain the property and redeem	it.	_
Description of	8001 Wesley Dr Go	olden Valley	Retain the property and enter into	оа	Yes
property	MN 55427 Hennep		Reaffirmation Agreement. Retain the property and [explain]:		
securing debt:	Legally described	as: Lot 1,	Tretain the property and [explain].	•	
Ŭ	Block 2, Golden O				
	Addition, Hennepi Minnesota.	n County,			
	In redemption peri	od. Tax value			
	is \$232,000.00. Sh bid was \$286,137.	eriff's sale			
Creditor's C	ALIBER HOME LOA	NS	☐ Surrender the property.		□ No
name:			Retain the property and redeem		■ Vaa
Description of	8001 Wesley Dr Go MN 55427 Hennep Legally described Block 2, Golden O	oin County as: Lot 1,	☐ Retain the property and enter into Reaffirmation Agreement.) a	■ Yes
	Addition, Hennepi				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 45 of 67

De	btor 1	Anna	H Babington-Johnson	Case number (if known)	
	property securing	debt:	Minnesota. In redemption period. Tax value is \$232,000.00. Sheriff's sale bid was \$286,137.54.	☐ Retain the property and [explain]:	_
Par For in th	any une ne inforn	on of debt:	below. Do not list real estate leases. Ur	■ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: □ Retain the property and [explain]: □ In Schedule G: Executory Contracts and Unexpired expired leases are leases that are still in effect; the the trustee does not assume it. 11 U.S.C. § 365(p)(2)	e lease period has not yet ended.
De	scribe yo	our ur	nexpired personal property leases		Will the lease be assumed?
	ssor's nar scription		sed		□ No
	perty:				☐ Yes
	ssor's nar		and		□ No
	perty:	OI leas	seu		☐ Yes
	ssor's nar				□ No
	scription perty:	of leas	sed		☐ Yes
	ssor's nar				□ No
	scription perty:	of leas	sed		☐ Yes
	ssor's na				□ No
	scription perty:	of leas	sed		☐ Yes
Les	ssor's nai	me:			□ No
	scription perty:	of leas	sed		☐ Yes
Les	ssor's nai	me:			□ No
_	scription perty:	of leas	sed		☐ Yes
Pai	rt 3: S	ign Be	elow		
Und	ler pena	Ity of		y intention about any property of my estate that sec	ecures a debt and any personal
Χ	/s/ An	na H	Babington-Johnson	X	
			bington-Johnson Debtor 1	Signature of Debtor 2	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 46 of 67

Debtor 1	Anna H Babington-Johnson		Case number (if known)	
Date	May 3, 2017	Date		

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 47 of 67

LOCAL FORM 1007-1 REVISED 06/16

United States Bankruptcy Court District of Minnesota

In r				Case No.	_	
	Debtor	r(s)		Chapter	-	7
	DISCLOSURE OF COMPENSATION	OF	ATTOR	NEY FOR	DE	BTOR
paid	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(tor(s) and that compensation paid to me within one year before to me, for services rendered or to be rendered on behalf of the kruptcy case is as follows:	e th	e filing of	the petition in	n ba	inkruptcy, or agreed to be
Pric	r legal Services, I have agreed to accept	\$ \$ \$	1,500.00 1,500.00 0.00			
2.	The source of the compensation paid to me was: ■ Debtor □ Other (specify))				
3.	The source of the compensation to be paid to me is: ■ Debtor □ Other (specify))				
4. asso	■ I have not agreed to share the above-disclosed compensation of my law firm.	tion	with any	other person	unl	ess they are members and
	☐ I have agreed to share the above-disclosed compensation ociates of my law firm. A copy of the agreement, together with compensation, is attached.					
5. requ	In return for the above-disclosed fee, together with such faired by 11 U.S.C. §528(a)(1), I have agreed to render legal se			•		
	A. Analysis of the debtor's financial situation, and rendering petition in bankruptcy;	ng a	advice to	the debtor in	det	ermining whether to file a
	B. Preparation and filing of any petition, schedules, statemen	ıts c	of affairs a	and plan which	n m	ay be required;
	C. Representation of the debtor at the meeting of creditors thereof;	an	d confirm	nation hearing	, ar	nd any adjourned hearings
	D. Representation of the debtor in contested bankruptcy mat	ters	; and			
	E. Other services reasonably necessary to represent the debte	or(s).			
6.	Pursuant to Local Rules 1007-1 and 1007-3-1, I have advi	ised	the debt	or of the requ	iire	ments in the Statement of

Addendum to item 3

best of my knowledge.

If any unpaid balance remains due and payable under Section 1 of this statement, in a Chapter 7 case, the Debtor(s) will have no obligation to pay that amount and the undersigned will not attempt to collect any of that unpaid balance from the

Financial Affairs to disclose all payments made, or property transferred, by or on behalf of the debtor to any person, including attorneys, for consultation concerning debt consolidation or reorganization, relief under bankruptcy law, or preparation of a petition in bankruptcy. I have reviewed the debtor's disclosures and they are accurate and complete to the

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 48 of 67

LOCAL FORM 1007-1 REVISED 06/16

Debtor(s). A Third Party Guarantor has guaranteed payment of that unpaid balance.

Addendum to item 5

(e) This fee agreement also provides for negotiations with creditors on behalf of the Debtor(s).

CERTIFICATION

I certify that the foregoing, together with the written contract required by 11 U.S.C. §528(a)(1), is a complete	
statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy ca	se.

Dated: May 3, 2017

Signature of Attorney
/s/ Matthew M. Tande

Matthew M. Tande 388339

Fill in t	his information to identify your case:					x only as d	lirected	in this form and	in Form
Debtor	Anna H Babington-Johnson			122	2A-1Supp:				
Debtor (Spouse,				[☐ 1. There	is no pres	umptio	n of abuse	
United	States Bankruptcy Court for the: District of Minneso	ta			applie	es will be n	nade ur	mine if a presum nder <i>Chapter 7 N</i> rm 122A-2).	•
Case r	number			,	_	`		,	
(, 							ot apply now bed e but it could app	
					☐ Check	if this is a	n ame	ended filing	
Offic	cial Form 122A - 1								
Cha	pter 7 Statement of Your Cur	ren	t Mor	nthly Inc	ome				12/15
attach a case nu	omplete and accurate as possible. If two married people a separate sheet to this form. Include the line number to w mber (if known). If you believe that you are exempted from military service, complete and file Statement of Exempter Calculate Your Current Monthly Income	hich the	e additior sumption	nal information a of abuse becaus	pplies. On t se you do n	he top of a ot have prin	ny addit narily c	tional pages, write onsumer debts or	your name and because of
	/hat is your marital and filing status? Check one on	ly.							
	Not married. Fill out Column A, lines 2-11.								
	I Married and your spouse is filing with you. Fill ou	ıt both	Columns	A and B, lines	2-11.				
	Married and your spouse is NOT filing with you.	You an	nd your s	spouse are:					
	Living in the same household and are not lega	lly sep	arated.	Fill out both Col	umns A an	d B, lines 2	2-11.		
	☐ Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are left living apart for reasons that do not include evading	egally s	separated	d under nonban	kruptcy law	that appli	es or th		
101(the 6	n the average monthly income that you received from all standards. For example, if you are filing on September 15, the 6-mins months, add the income for all 6 months and divide the total uses own the same rental property, put the income from that property.	onth per by 6. Fi	riod would Il in the res	be March 1 throusult. Do not include	igh August 3 le any incom	 If the amount m 	ount of y ore than	our monthly income once. For example	e varied during e, if both
					Column A Debtor 1		Debt	mn B or 2 or filing spouse	
	our gross wages, salary, tips, bonuses, overtime, a ayroll deductions).	and co	mmissio	ons (before all	\$	0.00	\$	7,916.66	
	limony and maintenance payments. Do not include olumn B is filled in.	payme	ents from	a spouse if	\$	0.00	\$	0.00	
ot fro ar	Il amounts from any source which are regularly pa f you or your dependents, including child support. om an unmarried partner, members of your household nd roommates. Include regular contributions from a sp led in. Do not include payments you listed on line 3.	Includ I, your	e regular depende	contributions nts, parents,	\$	0.00	\$	0.00	
5. N	et income from operating a business, profession,	or farn							
		•		otor 1					
	ross receipts (before all deductions)	\$_	0.00						
	rdinary and necessary operating expenses	-\$ _		Copy here ->	\$	0.00	\$	0.00	
	et monthly income from a business, profession, or farr	пъ	0.00	Copy nere ->	Ψ	0.00	Ψ	0.00	
6. N	et income from rental and other real property		Deh	otor 1					
_	ross receipts (before all deductions)	\$	0.00						
	rdinary and necessary operating expenses	-\$	0.00						
	et monthly income from rental or other real property	\$		Copy here ->	\$	0.00	\$	0.00	

Official Form 122A-1

0.00

\$

7. Interest, dividends, and royalties

0.00

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Mair Document Page 50 of 67

Anna H Babington-Johnson Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: 0.00 \$ For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. \$ 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 \$ 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 0.00 7,916.66 \$ 7,916.66 \$ each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: Copy line 11 here=> 12a. Copy your total current monthly income from line 11 7,916.66 Multiply by 12 (the number of months in a year) 12 94,999.92 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. MN Fill in the number of people in your household. 70,889.00 Fill in the median family income for your state and size of household. 13. \$ To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14b. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Anna H Babington-Johnson **Anna H Babington-Johnson** Signature of Debtor 1 Date May 3, 2017 MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 51 of 67

Fill in this information to identify your case:						
Debtor 1	Anna H Babington-Johnson					
Debtor 2 (Spouse, if filing)						
United States Bankruptcy Court for the: District of Minnesota						
Case number (if known)						

Check the appropriate box as directed in lines 40 or 42:	
According to the calculations required by this Statement:	
■ 1. There is no presumption of abuse.	
☐ 2. There is a presumption of abuse.	

☐ Check if this is an amended filing

Official Form 122A - 2

Chapter 7 Means Test Calculation

04/16

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Copy your total current monthly income. Copy line 1	1 from Offi	icial Form 122	\-1 here=>	\$	7,916.66
Did you fill out Column B in Part 1 of Form 122A-1?					
☐ No. Fill in \$0 for the total on line 3.					
■ Yes. Is your spouse Filing with you?					
■ No. Go to line 3.					
☐ Yes. Fill in \$0 for the total on line 3.					
Adjust your current monthly income by subtracting any part of your household expenses of you or your dependents. Follow these steps:	spouse's i	ncome not use	ed to pay for the		
On line 11, Column B of Form 122A–1, was any amount of the income you expenses of you or your dependents?	ou reported	for your spouse	NOT regularly us	sed for the	household
☐ No. Fill in 0 for the total on line 3.					
Yes. Fill in the information below:					
State each purpose for which the income was used	Fil	I in the amoun	t you		
For example, the income is used to pay your spouse's tax debt or t	o are	e subtracting four spouse's inc	om		
support other than you or your dependents.					
Husband's monthly payroll deductions	\$	1,932.76			
, , , ,	\$ \$	1,932.76			
Husband's monthly payroll deductions	_				
Husband's monthly payroll deductions Husband's car payment	\$	649.00			
Husband's monthly payroll deductions Husband's car payment Husband's mointhly loan and debt payments	*	649.00 1,635.00	Copy total here		4.616.76

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categoriespeople who are under 65 and people who are 65 or olderbecause older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22. People who are under 65 years of age 7a. Out-of-pocket health care allowance per person \$ 49 7b. Number of people who are under 65 X 2 7c. Subtotal. Multiply line 7a by line 7b. \$ 98.00 Copy here=> \$ 98.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person \$ 117 7e. Number of people who are 65 or older X 0		Case 17-41328 Doc 1 Filed 05 Docum			ered 05/03/17 0 52 of 67	9:17:17	Desc Mai	n
The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankrupcy clerk's office. Deduct the expense amounts set out in lines 6-15 regardless of your actual expenses. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your sclual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your sclual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your sclual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your sclual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your subscriptions on your federal income in lines 5 and 6 of form 122A-1. If your expenses differ from month to month, enter the average expense. Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in. 5. The number of people used in determining your deductions from income Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of people who can you the people who could be claimed as exemptions on your federal income tax return, plus the number of people in your household. National Standards You must use the IRS National Standards to answer the questions in lines 6-7. 6. Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people you en	Debtor 1	Anna H Babington-Johnson		_	Case number (if k	nown)		
to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be a variable at the bankruptcy clerk's office. Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 122A-1. If your expenses differ from month to month, enter the average expense. Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in. 5. The number of people used in determining your deductions from income Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of people who could be claimed as exemptions on your federal income tax return, plus the number of people in your household. National Standards You must use the IRS National Standards to answer the questions in lines 6-7. 6. Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items. 7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories-people who are under 65 and people who are 65 or defer-because clider people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22. People who are under 65 years of age 7a. Out-of-pocket health care allowance per person \$\frac{49}{2}\$. Subtotal. Multiply line 7a by line 7b. \$\frac{98}{2}\$. 98.00 Copy here=> \$98	Part 2:	Calculate Your Deductions from Your Income						
your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fror your spouses income in line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 122A-1. If your expenses differ from month to month, enter the average expenses. Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in. 5. The number of people used in determining your deductions from income Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from 2 National Standards You must use the IRS National Standards to answer the questions in lines 6-7. 6. Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items. 7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22. People who are under 65 years of age 7a. Out-of-pocket health care allowance per person \$ 49 7b. Number of people who are under 65 X 2 7c. Subtotal. Multiply line 7a by line 7b. \$ 98.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person \$ 117 7e. Number of people who are 65 or older	to ans	swer the questions in lines 6-15. To find the IRS star	ndards, go	online u	sing the link specified			
Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in. 5. The number of people used in determining your deductions from income Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household. National Standards You must use the IRS National Standards to answer the questions in lines 6-7. 6. Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items. 7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories-people who are under 65 and people who are 6 to older-because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22. People who are under 65 years of age 7a. Out-of-pocket health care allowance per person \$ 49 7b. Number of people who are under 65 X 2 7c. Subtotal. Multiply line 7a by line 7b. \$ 98.00 Copy here> \$ 98.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person \$ 117 7e. Number of people who are 65 or older X 0	your a	ctual expenses if they are higher than the standards. De	o not deduc	t any am	ounts that you subtract	ted fro your sp	oouse's	
5. The number of people used in determining your deductions from income Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household. National Standards You must use the IRS National Standards to answer the questions in lines 6-7. 6. Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items. 7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care allowance in the number of people who are under 65 and people who are under 65 and people who are under 65 years of age 7a. Out-of-pocket health care allowance per person \$ 49 7b. Number of people who are under 65	If your	expenses differ from month to month, enter the averag	e expense.					
Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household. National Standards You must use the IRS National Standards to answer the questions in lines 6-7. Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items. 1,132.00 Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are food of older-because older people have a rejiber IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22. People who are under 65 years of age 7a. Out-of-pocket health care allowance per person \$ 49 7b. Number of people who are under 65 X 2 7c. Subtotal. Multiply line 7a by line 7b. \$ 98.00 Copy here=> \$ 98.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person \$ 117 7e. Number of people who are 65 or older X 0	When	ever this part of the from refers to you, it means both yo	u and your	spouse if	Column B of Form 12	2A-1 is filled i	n.	
National Standards You must use the IRS National Standards to answer the questions in lines 6-7. 6. Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items. 7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categoriespeople who are the fool of olderbecause older people have a higher IRS allique are for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22. People who are under 65 years of age 7a. Out-of-pocket health care allowance per person \$ 49 7b. Number of people who are under 65	5. T	he number of people used in determining your ded	uctions fro	m incom	e			
6. Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items. 7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22. People who are under 65 years of age 7a. Out-of-pocket health care allowance per person \$ 49	р	lus the number of any additional dependents whom you					2	
Standards, fill in the dollar amount for food, clothing, and other items. 1,132.00 7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categoriespeople who are under 65 and people who are 65 or olderbecause older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22. People who are under 65 years of age 7a. Out-of-pocket health care allowance per person \$ 49	Natio	nal Standards You must use the IRS National	Standards	to answe	er the questions in lines	s 6-7.		
the dollar amount for out-of-pocket health care. The number of people is split into two categoriespeople who are under 65 and people who are 65 or olderbecause older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22. People who are under 65 years of age 7a. Out-of-pocket health care allowance per person \$ 49					n line 5 and the IRS Na	ational	\$	1,132.00
7a. Out-of-pocket health care allowance per person \$ 49 7b. Number of people who are under 65 X 2 7c. Subtotal. Multiply line 7a by line 7b. \$ 98.00 Copy here=> \$ 98.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person \$ 117 7e. Number of people who are 65 or older X 0	tl p	ne dollar amount for out-of-pocket health care. The num eople who are 65 or olderbecause older people have	ber of peop a higher IR	ole is split S allowar	into two categoriespace for health care cost	eople who are	e under 65 and	
7b. Number of people who are under 65	Peopl	e who are under 65 years of age						
7c. Subtotal. Multiply line 7a by line 7b. \$ 98.00 Copy here=> \$ 98.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person \$ 117 7e. Number of people who are 65 or older X 0	7	a. Out-of-pocket health care allowance per person	\$	49				
People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person \$17 7e. Number of people who are 65 or older X0	7	b. Number of people who are under 65	X	2				
7d. Out-of-pocket health care allowance per person \$ 117 7e. Number of people who are 65 or older X 0	7	c. Subtotal. Multiply line 7a by line 7b.	\$	98.00	Copy here=>	\$	98.00	
7e. Number of people who are 65 or older X	Peopl	e who are 65 years of age or older						
	7	d. Out-of-pocket health care allowance per person	\$	117				
	7	e. Number of people who are 65 or older	X	0				
7f. Subtotal. Multiply line 7d by line 7e. \$ 0.00 Copy here=> +\$ 0.00	7	f. Subtotal. Multiply line 7d by line 7e.	\$	0.00	Copy here=>	+\$	0.00	

98.00

7g. Total. Add line 7c and line 7f

98.00

Copy total here=> \$

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 53 of 67

Debtor 1 Anna H Babington-Johnson

Case number (if known)

Loc	al Sta	andards	You mus	t use the	IRS Loca	d Standar	ds to ans	wer the qu	uestions i	in lir	nes 8-1	5.						
			ation from oses into t			Trustee F	Program	has divid	led the If	RS I	₋ocal S	itand	ard for	hous	ing for			
■ H	lousi	ng and u	ıtilities - In	surance	and ope	rating ex	penses											
■ F	lousi	ng and u	ıtilities - M	ortgage	or rent ex	xpenses												
To a	ınsw	er the qu	estions in	lines 8-9), use the	u.S. Tru	ıstee Pro	gram cha	art.									
To f	nd th	e chart. a	o online us	sina the li	nk specifi	ed in the	separate	instruction	ns for this	s for	m.							
			o be availa															
8.			l utilities - mount liste												e 5, fill	\$		517.00
9.	Hou	sing and	l utilities -	Mortgag	e or rent	expense	s:											
	9a.		e number o										\$; 1	1,449.0	0		
	9b.	Total ave	erage mon	thly payn	nent for all	I mortgag	es and of	ther debts	secured	by y	our ho	me.						
		contractu	late the tot ually due to ruptcy. The	each se	cured cre													
		Name of	the credito	or				Average payment	monthly t									
		-NONE	-					\$										
				Total av	erage mo	onthly pay	ment	\$	0.	00	Cop here	-	-\$		0.	.00	Repeat this amount on line 33a.	
	9c.	Net mort	tgage or re	nt expen	se.													
			line 9b (to expense). If								\$		1,4	49.00	Co hei	py e=>	\$	1,449.00
10.			that the U. alculation										g is in	correc	t and		\$	0.00
	Ex	plain why:	• •															
11.	Loc	al transp	ortation e	xpenses	: Check th	ne numbe	r of vehic	les for wh	ich you c	laim	n an ow	nersh	ip or o	peratir	ng expe	nse.		
		. Go to lin	ne 14.															
	1	. Go to lin	ne 12.															
	□ 2	or more.	Go to line	12.														
12.			ation expe														\$	396.00

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Mail Document Page 54 of 67

Anna H Babington-Johnson Debtor 1 Case number (if known) Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 Describe Vehicle 1: 13a. Ownership or leasing costs using IRS Local Standard..... 0.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you filed for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment -NONE-Repeat this Сору **Total Average Monthly Payment** \$ 0.00 0.00 here => -\$ line 33b. Copy net 13c. Net Vehicle 1 ownership or lease expense Vehicle 1 Subtract line 13b from line 13a. if this amount is less than \$0, enter \$0. expense 0.00 0.00 here => \$ Vehicle 2 **Describe Vehicle 2:** 13d. Ownership or leasing costs using IRS Local Standard..... 0.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment Copy Repeat this here amount on **Total Average Monthly Payment** Copy net 13f. Net Vehicle 2 ownership or lease expense Vehicle 2 Subtract line 13e from line 13d. if this amount is less than \$0, enter \$0. expense 0.00 0.00 here => \$ 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the Public 0.00 Transportation expense allowance regardless of whether you use public transportation. 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may 0.00 not claim more than the IRS Local Standard for Public Transportation.

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 55 of 67

Debtor 1 Anna H Babington-Johnson Case number (if known)

Oth	er Necessary Expenses	In addition to the expense deductions listed above, you are allowed your monthly expenses	for	
		the following IRS categories.		
16.	self-employment taxes, soo your pay for these taxes. H	mount that you will actually owe for federal, state and local taxes, such as income taxes, sial security taxes, and Medicare taxes. You may include the monthly amount withheld from owever, if you expect to receive a tax refund, you must divide the expected refund by 12 from the total monthly amount that is withheld to pay for taxes.		
	Do not include real estate,	sales, or use taxes.	\$	0.00
17.	Involuntary deductions: 7 contributions, union dues, a	The total monthly payroll deductions that your job requires, such as retirement and uniform costs.		
	Do not include amounts that	at are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	0.00
18.	filing together, include payr	nonthly premiums that you pay for your own term life insurance. If two married people are ments that you make for your spouse's term life insurance. Do not include premiums for life ents, for a non-filing spouse's life insurance, or for any form of life insurance other than	\$	0.00
19.		The total monthly amount that you pay as required by the order of a court or has spousal or child support payments.		
	Do not include payments o	n past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total mont as a condition for your ju	hly amount that you pay for education that is either required: bb, or		
	for your physically or me	entally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total month	aly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.		
	Do not include payments for	or any elementary or secondary school education.	\$	0.00
22.	that is required for the heal	penses, excluding insurance costs: The monthly amount that you pay for health care th and welfare of you or your dependents and that is not reimbursed by insurance or paid it. Include only the amount that is more than the total entered in line 7.		
	Payments for health insura	nce or health savings accounts should be listed only in line 25.	\$	0.00
23.	for you and your dependen	elephone services: The total monthly amount that you pay for telecommunication services ts, such as pagers, call waiting, caller identification, special long distance, or business cell to necessary for your health and welfare or that of your dependents or for the production of ed by your employer.		
		or basic home telephone, internet and cell phone service. Do not include self-employment eported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$	0.00
24.	Add all of the expenses a Add lines 6 through 23.	illowed under the IRS expense allowances.	\$	3,592.00

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 56 of 67

Debtor 1 Anna H Babington-Johnson Case number (if known)

Add	itional Expense Deductions These are additional de	eductions	s allowed by the	e Means Test.		
	Note: Do not include a	ny expen	se allowances	listed in lines 6-24.		
25.	Health insurance, disability insurance, and health sa insurance, disability insurance, and health savings accoyour dependents.				r	
	Health insurance	\$	573.00			
	Disability insurance	\$	0.00			
	Health savings account	+ \$	0.00			
	Total	\$	573.00	Copy total here=>	\$	573.00
	Do you actually spend this total amount?			'		
	No. How much do you actually spend?					
	Yes	\$				
26.	Continued contributions to the care of household or continue to pay for the reasonable and necessary care a your household or member of your immediate family who include contributions to an account of a qualified ABLE p	and supp o is unab	ort of an elderly ble to pay for su	y, chronically ill, or disabled member of ich expenses. These expenses may	\$	0.00
27.	Protection against family violence. The reasonably no safety of you and your family under the Family Violence					
	By law, the court must keep the nature of these expense	es confide	ential.		\$	0.00
28.	Additional home energy costs. Your home energy cosline 8.	sts are in	cluded in your	insurance and operating expenses on		
	If you believe that you have home energy costs that are 8, then fill in the excess amount of home energy costs.	more tha	an the home en	ergy costs included in expenses on line		
	You must give your case trustee documentation of your amount claimed is reasonable and necessary.	actual ex	rpenses, and y	ou must show that the additional	\$	0.00
29.	Education expenses for dependent children who are \$160.42* per child) that you pay for your dependent child public elementary or secondary school.					
	You must give your case trustee documentation of your claimed is reasonable and necessary and not already ac					
	* Subject to adjustment on 4/01/19, and every 3 years at	fter that f	or cases begur	n on or after the date of adjustment.	\$	0.00
30.	Additional food and clothing expense. The monthly a higher than the combined food and clothing allowances than 5% of the food and clothing allowances in the IRS I	in the IR	S National Star			
	To find a chart showing the maximum additional alloward instructions for this form. This chart may also be availab					
	You must show that the additional amount claimed is rea	asonable	and necessary	<i>I</i> .	\$	0.00
31.	Continuing charitable contributions. The amount that instruments to a religious or charitable organization. 26 kg. 10 k			ntribute in the form of cash or financial	+\$	0.00
32.	Add all of the additional expense deductions. Add lines 25 through 31.				\$	573.00

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 57 of 67

Debtor 1 Anna H Babington-Johnson Case number (if known)

	ctions for Debt Payment							
	or debts that are secured by an inter pans, and other secured debt, fill in li	rest in property that you own, including hor ines 33a through 33e.	ne mor	tgages, ve	hicle			
	o calculate the total average monthly preditor in the 60 months after you file fo	ayment, add all amounts that are contractually r bankruptcy. Then divide by 60.	due to	each secu	red			
	Mortgages on your home:						erage mo yment	nthly
33a.	Copy line 9b here					=> \$		0.00
	Loans on your first two vehicles:							
33b.	Copy line 13b here				=	=> \$		0.00
33c.	Copy line 13e here					=> \$		0.00
33d.	List other secured debts:							
Name	of each creditor for other secured debt	Identify property that secures the debt		inclu	payment de taxes ance?			
					No			
	-NONE-			_	Yes	\$		
					. 55	Ψ.		
					No			
				_ □	Yes	\$		
					No			
				_	Yes	+\$		
						-•Ψ. ¬		
						Сору		
33e.	Total average monthly payment. Add	lines 33a through 33d	\$_		0.00	total here=>	\$	0.00
0	r other property necessary for your s No. Go to line 35. Yes. State any amount that you mu	3 secured by your primary residence, a veh support or the support of your dependents st pay to a creditor, in addition to the payment ession of your property (called the <i>cure amoun</i> e information below	? s					
Nam	e of the creditor	Identify property that secures the debt		Total cu			Monthly	cure
NC	NIE			\$			umount	
-NC	NE-			Φ		÷ 60 = \$		
		To	otal \$_		0.00	Copy total here=>	\$	0.
		as a priority tax, child support, or alimony - our bankruptcy case? 11 U.S.C. § 507.	that					
a	_							
a E	No. Go to line 36.	those priority plaims. Do not include accept a	-					
a	No. Go to line 36.	these priority claims. Do not include current o	r					

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 58 of 67

ebtor 1	Anna	a H Babington-Jonnson		Cas	se ni	umber (if known)
F	or more	eligible to file a case under Chapter 13? 11 U.S.C. § information, go online using the link for Bankruptcy Bans for this form. Bankruptcy Basics may also be available.	s <i>ics</i> specifi			
	No.	Go to line 37.				
		Fill in the following information.				
		Projected monthly plan payment if you were filing under	er Chapter	13	\$	
		Current multiplier for your district as stated on the list in Administrative Office of the United States Courts (for cand North Carolina) or by the Executive Office for Unite (for all other districts).	districts in A	Alabama	X	
		To find a list of district multipliers that includes your district link specified in the separate instructions for this for the available at the bankruptcy clerk's office.				Copy total
		Average monthly administrative expense if you were fi	iling under	Chapter 13		\$ here=> \$
		of the deductions for debt payment. ss 33e through 36.				\$5,843.65_
Tota	l Deduc	tions from Income				
38. A	Add all o	f the allowed deductions.				
		e 24, All of the expenses allowed under IRS e allowances	\$	3,592.00	0	
	Copy lin	e 32, All of the additional expense deductions	\$	573.00	0_	
	Copy lin	e 37, All of the deductions for debt payment	+\$	5,843.65	5	٦
		Total deductions	\$	10,008.65	5_	Copy total here=> \$10,008.65
art 3:	Det	ermine Whether There is a Presumption of Abuse				_
39. C	Calculate	e monthly disposable income for 60 months				
	39a. Co	py line 4, adjusted current monthly income	\$	3,299.90	0	
		py line 38, <i>Total deductions</i>	- \$	10,008.65	5	
		onthly disposable income. 11 U.S.C. § 707(b)(2). btract line 39b from line 39a	\$	-6,708.75	_	Copy here=>\$ -6,708.75
	For the	next 60 months (5 years)				x 60
			,			
	39d. To	tal. Multiply line 39c by 60	39	od. \$	402	2,525.00 Copy here=> \$402,525.00
40. F	ind out	whether there is a presumption of abuse. Check the	e box that a	applies:		
	■ The I	ine 39d is less than \$7,700*. On the top of page 1 of t	:his form, c	heck box 1, The	ere	is no presumption of abuse. Go to Part 5.
[☐ The I	ine 39d is more than \$12,850*. On the top of page 1 of the following special circumstances. Go to Part 5.				
Г	☐ The I	ine 39d is at least \$7,700*, but not more than \$12,85	50*. Go to l'	ine 41.		
		to adjustment on 4/01/19, and every 3 years after that f			the	date of adjustment
,	-uvj c ∪l	io adjastificiti off 7/01/15, alla every 5 years after that i	or cases III	וטט טוו טו מונפו נ	1110	auto or aujustinorit.

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 59 of 67

ebtor 1	Ann	a H Babington-Johnson	Case number (if known)		
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you filled out A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form.	\$ x .25		
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)(1) 6	Copy here=>	\$
		Multiply line 41a by 0.25			
2	5% of y	ne whether the income you have left over after subtracting all allowed decour unsecured, nonpriority debt. e box that applies:	ductions is enough to pay		
		39d is less than line 41b. On the top of page 1 of this form, check box 1, <i>The</i> part 5.	re is no presumption of abu	se.	
		39d is equal to or more than line 41b. On the top of page 1 of this form, checumption of abuse. You may fill out Part 4 if you claim special circumstances. The			
art 4:	Giv	ve Details About Special Circumstances			
		we any special circumstances that justify additional expenses or adjustment alternative? 11 U.S.C. \S 707(b)(2)(B).	ents of current monthly in	come fo	or which there is no
	No. Go	o to Part 5.			
		I in the following information. All figures should reflect your average monthly ex m. You may include expenses you listed in line 25.	pense or income adjustmer	nt for ea	ch
	ne	ou must give a detailed explanation of the special circumstances that make the cessary and reasonable. You must also give your case trustee documentation justments.			
	G		Average monthly expense or income adjustment		
			\$		
			\$		
			\$		
			\$		
	_				
art 5:	_	n Below			
	By si	gning here, I declare under penalty of perjury that the information on this stater	nent and in any attachments	s is true	and correct.
		Anna H Babington-Johnson			
		nna H Babington-Johnson gnature of Debtor 1			
D		ay 3, 2017			
	MN	M / DD / YYYY			

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 60 of 67

Debtor 1 Anna H Babington-Johnson Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 11/01/2016 to 04/30/2017.

Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 61 of 67

Debtor 1 Anna H Babington-Johnson Case number (if known)

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 11/01/2016 to 04/30/2017.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Stair Step Foundation

Income by Month:

6 Months Ago:	11/2016	\$7,916.66
5 Months Ago:	12/2016	\$7,916.66
4 Months Ago:	01/2017	\$7,916.66
3 Months Ago:	02/2017	\$7,916.66
2 Months Ago:	03/2017	\$7,916.66
Last Month:	04/2017	\$7,916.66
	Average per month:	\$7,916.66

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation	
\$24	5	filing fee	
\$7	'5	administrative fee	
+ \$1	15	trustee surcharge	
\$33	35	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-41328 Doc 1 Filed 05/03/17 Entered 05/03/17 09:17:17 Desc Main Document Page 66 of 67

United States Bankruptcy Court District of Minnesota

		District of Minnesota							
In re Ar	nna H Babington-Johnson		Case No.						
		Debtor(s)	Chapter	7					
VERIFICATION OF CREDITOR MATRIX									
The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.									
Date: Ma	y 3, 2017	/s/ Anna H Babington-Johnson							

Signature of Debtor

HALPERN ATTORNEYS AT LAW 5 DOCHMENT CT Rage 67 OF 67 T 10 SOUTH 5TH ST #400 PO BOX 64447 MPLS MN 55402 ST PAUL MN 55164

BOSTON SCICASSET 17-41328P Doc 1 Mailed 1-05/03/17 REVENTEUR 05/03/17 09:17:17 Desc Main

OKLAHOMA CITY OK 73134-2500 NORFOLK VA 23541-1067

CALIBER HOME LOANS PORTFOLIO RECOVERY ASSOCIATES 13801 WIRELESS WAY PO BOX 41067

CALIBER HOME LOANS PREMIER MOVING
13801 WIRELESS WAY 2468 LOUISIANA AVE N OKLAHOMA CITY OK 73134-2500 GOLDEN VALLEY MN 55427

CAPITAL ONE MASTERCARD
6125 LAKEVIEW RD
SUITE 800
CHARLOTTE NC 28269-2605

THE BANK OF NEW YORK MELLON
METRO LEGAL SVC INC
330 2ND AVE S #150
MPLS MN 55401

CHASE AUTO FINANCE UNITED VAN LINES LLC PO BOX 901076 GURSTEL LAW MARK MILL

PO BOX 901076 GURSTEL LAW MARK MILLER FT WORTH TX 76101-2076 6681 COUNTRY CLUB DR GOLDEN VALLEY MN 55427

CHASE AUTO FINANCE VICTOR INC
PO BOX 901076 1600 S 3RD ST
FT WORTH TX 76101-2076 SANFORD NC 27330

GURSTEL CHARGO PA 6681 COUNTRY CLUB DR GOLDEN VALLEY MN 55427

INTERNAL REVENUE SERVICE CENTRALIZED INSOLVENCY OPS PO BOX 7346 PHILADELPHIA PA 19101-7346

KLATT AUGUSTINE SAYER TREINEN & RASTEDE, PC 925 E 4TH ST WATERLOO IA 50703

LOAN MAX 1409 COULEE RD HUDSON WI 54016